



<sbm@fecreports.com>

07/22/2016 06:13 PM

To pubrec@fec.gov,

cc

bcc

Subject Form 1

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

16 JUL 27 PM 3:05

1 attachment



FEC Form 1\_20160722.pdf

Please accept the attached Statement of Organization for Move Maryland Forward.

Scott B. Mackenzie

Asst. Treasurer

2016-08-03 AM 09:09

2016 AUG -3 AM 9:09

RECEIVED  
FEDERAL ELECTION COMMISSION  
PUBLIC RECORDS DIVISION

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS  
PAGE 1/4

16 JUL 27 PM 3:06

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

MOVE MARYLAND FORWARD

ADDRESS (number and street)

PO BOX 162

- ☐ (Check if address is changed)

ANNAPOLIS

CITY ▲

MD

STATE ▲

21404

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

- ☐ (Check if address is changed)

MoveMarylandForward@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

- ☐ (Check if address is changed)

2. DATE

07 / 22 / 2016

3. FEC IDENTIFICATION NUMBER ►

C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer

SCOTT B MACKENZIE

Date

07 / 22 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE

**Candidate Committee:**

- (a) ☐ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

REP

Office Sought:

☐

House

☒

Senate

☐

President

State

MD

District

00

- (c) ☒ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

KATHY SZELIGA

**Party Committee:**

- (d) ☐ This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

1.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

Write or Type Committee Name

**MOVE MARYLAND FORWARD****6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

SCOTT B MACKENZIE

Mailing Address

2776 S ARLINGTON MILL DR #806

ARLINGTON

VA

22206

Title or Position

CITY

STATE

ZIP CODE

ASSISTANT TREASURER

Telephone number

410

921

9228

**8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).Full Name  
of Treasurer

TONY PELURA

Mailing Address

692 RITCHIE HWY

SUITE 100

SEVERNA PARK

CITY

STATE

ZIP CODE

Title or Position  
TREASURER

Telephone number

410

921

9228

Full Name of  
Designated  
Agent

SCOTT B MACKENZIE

Mailing Address

2776 S ARLINGTON MILL DR #806

ARLINGTON

CITY

VA

STATE

22206

ZIP CODE

Title or Position

ASST TREASURER

Telephone number

410

921

9228

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

WELLS FARGO BANK

Mailing Address

93 MAIN STREET

ANNAPOLIS

CITY

MD

STATE

21401

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

**Via E-Mail**

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(3/2015)